Sedice 1		Effective December 8, 2004							Application or Dockel Number			
U.S. NATIONAL STAGE FEES BASIC FEE BASIC FEE Subdiscip PCT Article 53(1) EXAMINATION FEE (0 = 4 50 / 4 100 U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. bias 1 50 / 15 (50) SEARCH FEE U.S. \$250 - SEARC			CLAIM			1	SMALL	ENTITY		07/	3-70	
BASIC FEE SMALL ENT; = \$ 150 LARGE ENT; = \$ 300 EXAMINATION FEE Subsect PCT Article 33(1) EXAMINATION FEE SUBsect PCT Article 33(1) EXAMINATION FEE SEARCH FEE U.S. \$ 130 = \$ 30 1 \$ 100 All other shustions = \$ 100 1 \$ 100	U	.S. NATIONA	L STAGE FFF	(Co	lumn 1)	(Column 2)	TYPE					
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SEARCH FEE	Ð	EXAMINATION FEE		Satisties PC	T Article 33(1)		3,00,0			OR BASIC FEE	20	
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TOTAL CHARGEABLE CLAIMS	FE	E FOR EXTRA	SPEC. PGS.			· · · · · · · · · · · · · · · · · · ·			-	SEARCH FI	# 40	
MULTIPLE DEPENDENT CLAIMS minus 3 = . MULTIPLE DEPENDENT CLAIM PRESENT If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AFTER AMENDMENT PREVIOUSLY PRESENT PREVIOUSLY PAD FOR TOTAL ADDITIONAL FEE Independent Minus *** =	то	TAL CHARGE	ABLE CLAIMS	1						X \$ 250	=	
# If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 * CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) * MALL ENTITY OR * MALL ENTITY OR * MALL ENTITY OR * MALL ENTITY OR * ADDI- * TOTAL ODD * PARTE * ADDI- * TOTAL ADDIT. FEE OR * \$ \$00 = * \$ \$100 = OR * \$ \$400 = OR * \$ \$40	_			2	minus 3 = .		┨ ├───		-	ļ		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY SMALL ENTITY OR SMALL ENTITY ADDITIONAL FEE TOTAL OF TOTAL OF OR TOTAL OF OR TOTAL OF OR TOTAL OF SMALL ENTITY ADDITIONAL FEE TOTAL ADDITIONAL FEE OR X\$50 = X\$100 = OR X\$200 = +\$180 = OR TOTAL ADDITIONAL FEE (Column 1) (Column 2) (Column 3) (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PRESENT NUMBER NUM	_								-1	1.4 200	_ <u> </u>	
COlumn 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY CLAIMS REMAINING REMAINI	1	i vie differenc					TOTAL			1,000	901	
AFTER AMENDMENT PAID FOR PRESENT EXTRA Total * Minus **		(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST					SMALL	OTHER THAN SMALL ENTITY OR SMALL ENTITY				
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X\$ 100 =					-	=	X \$ 25 =		OR	X \$ 50 =	ree	
TOTAL ADDIT. Column 1)			SENTATION OF	1	1	=	X\$100 =		OR	X \$ 200 =	-	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER AMENDMENT FEE OR TOTAL ADDIT. FEE			ZMIAMON OF	WOLTHE DEP	ENDENT CL	NIM [OR	+ \$ 360 =		
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X \$ 100 = OR X \$ 200 = + \$ 180 = OR + \$ 360 = TOTAL ADDIT. OR TOTAL ADDIT.			AFTER		NUMBER PREVIOUS	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL	
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PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	į		*	•	1	1 1	X \$ 100 =		ŀ			
TOTAL ADDIT. OR TOTAL ADDIT.		FIRST PRES	ENTATION OF M	ULTIPLE DEPI	ENDENT CL AI	М	+ \$ 180 =		-			
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^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.